402040338

REPORT OF RECEIPTS SECRET ARY OF THE SENATE AND DISBURSEMENTS 20 PM 3: 33

FORM 3		Authorize	d Committee	141	11 29 PH 3. 9	ce Use Only .
NAME OF TYPE OR PRI COMMITTEE (in full)		NT ▼	Example: If over the line		12FE4M5	
Collins For Ser	nator					ı
<u> </u>						
					 	
ADDRESS (number and	d street)	6	* *		 	
Check if diff than previou reported. (AC	sly Bangor	1 1 1			ME 0440	2 1
2. FEC IDENTIFIC	ATION NUMBER ▼	CI	TY A	 	STATE A	ZIP CODE
C C0031457	5 5 ~— <u>1</u> :———————————————————————————————————	3. IS T REP		NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
(a) Quarterly Re	PORT (Choose One) ports: Quarterly Report (Q1) Quarterly Report (Q2)	(b) 12-D	ay PRE-Election Primary Convent	(12P)	General (12G) Special (12S)	Runoff (12R)
October	15 Quarterly Report (Q3)	Elec	tion on	M / D D O4	2014	in the ME State of
January	31 Year-End Report (YE)	(c) 30-D	ay POST-Election	Report for the	e:	
			[] General	(30G)	Runoff (30R)	্রি Special (30S)
Termination Report (TER)		Elec	tion on	/ 0 V D	, 	in the المسترة State of المسترة
5. Covering Period	M M / D D O1	/ Y Y Y Y 2014	throu	gh 05	21	2014
certify that I have ex	amined this Report and t	o the best o	f my knowledge a	and belief it is	true, correct and com	plete.
Type or Print Name of	Treasurer Elizabeth Mo	Candless	Treasu	rer		
Signature of Treasurer	Elizabeth McCandloss	but	Tub		Date 05	28 2014
	alse, erroneous, or incomp	ete informatio	n may subject the	person signing	this Report to the per	nalties of 2 U.S.C. §437g.
Office Use Only						EC FORM 3